



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Kaizawa	Lori	K.	524-4155
MAILING ADDRESS (Street)			FAX
1000 Bishop St., # 902			524-0573
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Advocates			SAME
MAILING ADDRESS (Street)			FAX
SAME			
(City)	(State)	(Zip Code)	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Bayer Corporation		203-812-3804
MAILING ADDRESS (Street)		FAX
400 Morgan Lane		203-812-6570
(City)	(State)	(Zip Code)
West Haven	CT	06516
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Elizabeth Bartz, President		330-761-9960
MAILING ADDRESS (Street)		FAX
State and Federal Communications, inc. 80 South Summit Street, # 100		330 -761-9965
(City)	(State)	(Zip Code)
Akron	OH	44308

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture

Education

☒ Human ServicesScience, Technology &
Economic DevelopmentCommunications &
Public UtilitiesGovernment Operations &
FinanceIntergovernmental Relations,
International Affairs

Tourism & Recreation

☒ Consumer Protection &
Commerce

Hawaiian Affairs

Labor & Employment

Transportation

Culture, Arts, Historic
Preservation☒ HealthPlanning, Land & Water
Use Management☒ Other: (indicate below)pharmaceuticalsEcology, Energy
Environmental Protection

Housing

Public Safety & Corrections

PART IV CERTIFICATION OF LOBBYIST*I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.**Sandra Oliver*
(Signature of Lobbyist)1-6-05

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

Sandra Oliver

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Director, State Government Affairs

NAME OF ORGANIZATION (if applicable)

Bayer Corporation

TELEPHONE

203-812-3804

MAILING ADDRESS (Street)

400 Morgan Lane

FAX

203-812-6570

(City)

West Haven

(State)

CT

(Zip Code)

06516

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

(Date)

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	<input checked="" type="checkbox"/> Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	<input checked="" type="checkbox"/> Health	Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below) <u>pharmaceuticals</u>
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Sandra Oliver

(Signature of Lobbyist)

(Date)

PART V AUTHORIZATION TO LOBBY

NAME Sandra Oliver		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Director, State Government Affairs	
NAME OF ORGANIZATION (if applicable) Bayer Corporation		TELEPHONE 203-812-3804	
MAILING ADDRESS (Street) 400 Morgan Lane		FAX 203-812-6570	
(City) West Haven	(State) CT	(Zip Code) 06516	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
<i>[Signature]</i>		1/7/05	
(Signature of Authorizing Officer or Person Represented)		(Date)	